

SCHEDULE CHANGE REQUEST FORM

-Please return form to the front desk-

Child's First Name

Child's Last Name

I request for the following changes to my child's schedule.

****** Changes to schedules - 4 weeks written notice or 4 weeks tuition is required******

Current:
Schedule

M

T

W

TH

F

Session: _____

Please fill box in with: (F) full day (H) half day
Elementary Age (B/A) before & after (B) before (A) after

Requested:
Schedule

M

T

W

TH

F

Session(s): _____

Please fill box in with: (F) full day (H) half day
Elementary Age (B/A) before & after (B) before (A) after

Parent Signature: _____ Date: _____

Date Received By Tots-N-Us: _____

Change will be effective: : _____
